## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Bacon & Thomas, PLLC 625 Slaters Lane, 4th FI Alexandria, VA 22314-1176



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

, (Depositor's name)
(Signature)
(Date)

							·		
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR				ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/580,314	02/12/2007	Alfred Rieder 89/			89/29/	29/2009RFEDRAMM1F8B808015 18588355 <sup>63</sup>			
TITLE OF INVENTION:				,	01 FC: 02 FC:		1510.00 OP 300.00 OP		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FE	E	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1510		\$300		\$1810	09/28/2009		
EXAMINER		ART UNIT		CLASS-SUBCLAS	S				
		<b>(</b>		·					
1. Change of correspondence address or indication of "Fee Address" (CFR 1.363).  Change of correspondence address (or Change of Corresponden Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custom Number is required.			(1) the na	nting on the patent front mes of up to 3 register		. Dacon & Inomas, FLEG			
			or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
	EE .	elow, no assignee of this form is NO	data will app I a substitute	ear on the patent. If a for filing an assignment CE: (CITY and STATE)		79 (	locument has been filed for		
•	assignee category or catego	ries (will not be pri	inted on the p	atent): 🗖 Individua	l 🗹 Co	rporation or other private gr	oup entity Government		
4a. The following fee(s) are	enclosed:	46	. Payment of	• •	(A) !=	11			
<ul> <li>✓ Issue Fee</li> <li>✓ A check in the amount of the fee(s) is enclosed.</li> <li>✓ Publication Fee (No small entity discount permitted)</li> <li>✓ Payment by credit card. Form PTO-2038 is attached.</li> </ul>									
Advance Order - # of	eu)	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-0200							
a. Applicant claims Si	(from status indicated above MALL ENTITY status. See	37 CFR 1.27.	4.1			L ENTITY status. See 37 C			
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issu ublication Fee (if required) vords of the United States Pate	ue Fee and Publicat vill not be accepted ent and Trademark	ion Fee (if an I from anyone Office.	y) or to re-apply any pr e other than the applican	eviously it: a regis	paid issue fee to the applica tered attorney or agent; or th	tion identified above.  ne assignee or other party in		
Authorized Signature	leon	Date 26 August 2009							
Typed or printed name Felix J. D Ambrosio			Registration No. 25721						

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571) 273-2885

				DUDG TO A TION FEE ALC	mired) Dipoke 1 through 5	should be completed where		
	respondence including the footbook or directed otherwise				quired). Blocks 1 through 5 will be mailed to the curren ss; and/or (b) indicating a ser			
	E ADDRESS (Note: Use Block 1 for a	any change of address)	papers. Each addition	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must				
625 Slaters Lane, 4th	FI			have its own certific	ate of mailing or transmission.			
Alexandria, VA 22314	-11/6	OFF B SAUG	ابيا	I hereby certify that	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
( SED & 8 5002					;	(Depositor's name)		
	\z		<b>5</b> /		(Signature)			
	V.	ENT & TRADEAN				(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED	NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/580,314	02/12/2007	Alfred Ried		Rieder	RIED3011/FJD	5663		
TITLE OF INVENTION:	•							
				•				
				DUDI ICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	\$1810	09/28/2009		
nonprovisional	NO NO	\$1510		\$300		03/20/2003		
EXAM	INÉR	ART UN	ART UNIT C					
		(						
1. Change of correspondence CFR 1.363).	e address or indication of "Fe	e Address" (37		ting on the patent front page.		homas, PLLC		
Change of correspondence address (or Change of Correspondence			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
Address form PTO/SB/12		tion form	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to					
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent attorneys or agents. If no name is 3_ listed, no name will be printed.					
	RESIDENCE DATA TO BI				•			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion of	low, no assignee of this form is NOT	data will appe l'a substitute (	ear on the patent. If an assignment.	gnee is identified below, the o	locument has been filed for		
(A) NAME OF ASSIGNI	EE .	(B	) RÉSIDENC	E: (CITY and STATE OR CO	OUNTRY)			
Endress & Hauser Flowt	ec AG .	R	teinach, Swit	zerland	,			
	•				•			
Please check the appropriate	assignee category or categor	ies (will not be pri	nted on the pa	atent): 🗖 Individual 🗹	Corporation or other private gr	oup entity  Government		
la. The following fee(s) are	enclosed:	4b	. Payment of I	` '	1 4			
Issue Fee		a).		n the amount of the fee(s) is one of the fee(s) is one of the fee(s) is one of the feet of	·			
Advance Order - # of	mall entity discount permitted	u)	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-0200					
			Deposit Acco	ount Number 02-02	00			
	(from status indicated above) MALL ENTITY status. See 3		☐ h Annlice	nnt is no longer claiming SM.	ALL ENTITY status. See 37 C	FR 1.27(g)(2).		
NOTE: The Issue Fee and Punterest as shown by the reco	ublication Fee (if required) words of the United States Pate	rill not be accepted nt and Trademark	from anyone Office.	other than the applicant; a re	sly paid issue fee to the applica gistered attorney or agent; or t	he assignee or other party in		
Authorized Signature	11/4/1/1/1/	PM//1 2	<del>-</del>	Date 26	August 2009			

Typed or printed name Felix J. D'Arghoesio

Registration No. 25721

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.